



The William E. Swigart, Jr. Automobile Museum

Volunteer Interest Application

Name: _____

Address: _____

City: _____

State: _____

Phone: _____

Email: _____

Months Available:

June

July

August

September

October

Days Available:

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Please indicate how much time you are willing to volunteer:

Full-time

Morning

Afternoon

Would you be interested in assisting with the Swigart Meet, an annual event held on the second Saturday in August?

Yes

No

Please list any skills relevant to the volunteer position:

How did you learn about volunteer opportunities at The William Swigart, Jr. Museum?
